Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11969246	A. BUILDING: _____ B. WING _____	02/04/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ELEVATED ESTATES EDWINOLA LLC	14235 EDWINOLA WAY DADE CITY, FL 33525

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments A complaint investigation (2026001497, 2026000783 and 2025019033) was conducted at Elevated Estates Edwinola on . Deficiencies were found at the time of the survey.	A 000		
A 079 SS=D	59A-36.010(3) FAC Staffing Standards - Levels (3) STAFFING STANDARDS. (a) Minimum staffing: 1. Facilities must maintain the following minimum staff hours per week: Number of Residents, Day Care Participants, and Respite Care Residents — Staff Hours/Week 0-5 — 168 212 16-25 — 253 26-35 — 294 36-45 — 335 46-55 — 375 56-65 — 416 66-75 — 457 76-85 — 498 86-95 — 539 For every 20 total combined residents, day care participants, and respite care residents over 95 add 42 staff hours per week. 2. Independent living residents, as referenced in subsection 59A-36.015(3), F.A.C., who occupy beds included within the licensed capacity of an assisted living facility but do not receive personal, limited nursing, or extended congregate care services, are not counted as residents for purposes of computing minimum staff hours. 3. At least one staff member who has access to facility and resident records in case of an emergency must be in the facility at all times when residents are in the facility. Residents	A 079		

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A 079	Continued From page 1	A 079		

serving as paid or volunteer staff may not be left solely in charge of other residents while the facility administrator, manager or other staff are absent from the facility.
4. In facilities with 17 or more residents, there must be at least one staff member awake at all hours of the day and night.
5. A staff member who has completed courses in First Aid and
( ) and holds a currently valid card documenting completion of such courses must be in the facility at all times.
a. Documentation of attendance at First Aid or courses pursuant to subsection 59A-36.011(5), F.A.C., satisfies this requirement.
b. A nurse is considered as having met the course requirements for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, part III, F.S., is considered as having met the course requirements for both First Aid and .
6. During periods of temporary absence of the administrator or manager of more than 48 hours when residents are on the premises, a staff member who is at least must be physically present and designated in writing to be in charge of the facility. No staff member shall be in charge of a facility for a consecutive period of 21 days or more, or for a total of 60 days within a calendar year, without being an administrator or manager.
7. Staff whose duties are exclusively building or grounds maintenance, clerical, or food preparation do not count towards meeting the minimum staffing hours requirement.
8. The administrator or manager's time may be counted for the purpose of meeting the required staffing hours, provided the administrator or manager is actively involved in the day-to-day

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A 079	Continued From page 2 operation of the facility, including making decisions and providing supervision for all aspects of resident care, and is listed on the facility's staffing schedule. 9. Only on-the-job staff may be counted in meeting the minimum staffing hours. Vacant positions or absent staff may not be counted. (b) Notwithstanding the minimum staffing requirements specified in paragraph (a), all facilities, including those composed of apartments, must have enough qualified staff to provide resident supervision, and to provide or arrange for resident services in accordance with the residents' scheduled and unscheduled service needs, resident contracts, and resident care standards as described in rule 59A-36.007, F.A.C. (c) The facility must maintain a written work schedule that reflects its 24-hour staffing pattern for a given time period. Upon request, the facility must make the daily work schedules of direct care staff available to residents or their representatives. (d) The facility must provide staff immediately when the agency determines that the requirements of paragraph (a) are not met. The facility must immediately increase staff above the minimum levels established in paragraph (a), if the agency determines that adequate supervision and care are not being provided to residents, resident care standards described in rule 59A-36.007, F.A.C., are not being met, or that the facility is failing to meet the terms of residents' contracts. The agency will consult with the facility administrator and residents regarding any determination that additional staff is required. Based on the recommendations of the local fire safety authority, the agency may require additional staff when the facility fails to meet the	A 079		

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A 079	Continued From page 3 fire safety standards described in rule chapter 69A-40, F.A.C., until such time as the local fire safety authority informs the agency that fire safety requirements are being met. 1. When additional staff is required above the minimum, the agency will require the submission of a corrective action plan within the time specified in the notification indicating how the increased staffing is to be achieved to meet resident service needs. The plan will be reviewed by the agency to determine if it sufficiently increases the staffing levels to meet resident needs. 2. When the facility can demonstrate to the agency that resident needs are being met, or that resident needs can be met without increased staffing, the agency may modify staffing requirements for the facility and the facility will no longer be required to maintain a plan with the agency. (e) Facilities that are co-located with a nursing home may use shared staffing provided that staff hours are only counted once for the purpose of meeting either assisted living facility or nursing home minimum staffing ratios. (f) Facilities holding a limited mental health, extended congregate care, or limited nursing services license must also comply with the staffing requirements of rules 59A-36.020, 59A-36.021 or 59A-36.022, F.A.C., respectively. This Statute or Rule is not met as evidenced by: Based on observations and interviews, the facility failed to provide sufficient staffing hours to ensure adequate supervision so the needs of the residents could be met in a safe manner for 167 residents that resided in the facility. Findings included:	A 079		

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A 079	Continued From page 4 During an interview on at 6:10 a.m., the receptionist stated only four employees were currently in the facility, including the receptionist. The receptionist also stated the inability of leaving the front desk except when on break. During an interview on at 6:32 a.m. the Receptionist stated the inability to provide any help on the floor due to not being able to leave the front desk. An observation conducted on between 6:10 a.m. and 7:00 a.m. revealed three employees provided resident care. - One staff member, the Wellness Director, was assigned to work floors 1 and 4 - 8. The census for those floors was 119. - One staff member, Staff B, an unlicensed Medication Technician, was assigned to work on floor 2, a secure Memory Care unit. The census for the 2nd floor was 19. - One staff member, Staff C, an unlicensed Medication Technician, was assigned to work on floor 3, a secure Memory care unit. The census for the 3rd floor was 29. An observation of the 3rd floor conducted on at approximately 6:47 a.m. revealed a white styrofoam dinner tray, from the previous night, sat on the dining room table in front of Resident #14 and dirty dishes on the kitchenette next to the coffee maker. During an interview on at 6:30 a.m., Staff B stated responsibility for about 20 residents with 11 that needed to have care. During an interview on at 6:37 a.m., Staff C stated responsibility for about 27 residents	A 079		

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A 079	Continued From page 5 with 6 residents that required care and Staff C was the only staff in the locked unit on that floor. Additionally, Staff C said responsibilities also included the 6:00 a.m. medications. During an interview on at 6:15 a.m., Resident #13 stated that it could take a while for call lights to be answered. During an interview on at 7:10 a.m., Staff D stated staffing was well below what was needed. Staff D stated second and third shift only had one medication technitian and that management did not seem concerned. During an interview on at 9:25 a.m., Resident #11 stated that it would depend on the day and situation whether or not the staff was quick to respond to call lights. During an interview on at 1:21 p.m., the Wellness , stated three staff did not feel like enough staff at night. During an interview on at 2:15 p.m. Staff K stated there were not enough staff on all shifts due to a great number of residents requiring a high level of care. A review of the facility's payroll, conducted on , verified that between and there were 780.72 hours on payroll, and between and there were 788.87 hours on payroll. The required minimum staffing hours were 707 hours per week for the current census of 167. During an interview conducted on at 1:00 p.m. the Administrator agreed the staffing	A 079		

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A 079	Continued From page 6 ratio was 3 staff to 50 residents that required care of memory care residents in locked units on two floors and others between floors in assisted living. During an interview on at 2:07 p.m. the Administrator agreed meal trays should not have been left out in memory care from the previous day. During an interview on at 1:29 p.m. the Administrator was asked how three employees could get 167 residents to safety in case of a fire. The Administrator responded "residents will just stay behind the fire doors" and did not provide any further information. Class III	A 079		